

CONCEPT DEFINITION WORKSHEET

- BRIDGE PROJECT -

I. Project Description:

Municipality: _____ County: _____

Local Road or Street Name: _____ Connecting Highway: _____

Feature: ☐ Over ☐ Under _____

Project Location: _____

Length of Project: _____

Current Average Daily Traffic (ADT): _____ Posted or Statutory Speed Limit: _____

Functional Classification: _____ Design Classification: _____

NOTE: Roadway must be a public roadway and the structure has to be 20 feet or greater in length to be eligible for funding.

II. Existing Facility:

Bridge Number: _____

Clear Bridge Width: _____ Clear Bridge Length: _____

Number of Spans: _____ Approach Pavement Width: _____

Most Recent Inspection Date: _____

Sufficiency Rating: _____

☐ Structurally Deficient (explain): _____

☐ Functionally Obsolete (explain): _____

Approach Pavement Type: _____

Sub-Standard Alignment? Horizontal: ☐ Yes ☐ No

Vertical: ☐ Yes ☐ No

Railroad: _____

III. Project Justification: (Why the project is needed and what the proposed improvements are if not indicated below.)

IV. Type of improvement: *(Select proposed improvement type and provide appropriate data.)*

Improvement Type:

☐ Bridge Replacement (explain): _____

☐ Bridge Rehabilitation (explain): _____

Structure Type: _____

Clear Bridge Width: _____ Clear Bridge Length: _____

Number of Spans: _____

Total Approach Work: _____ Approach Length: _____

Pavement Type: _____ Total Pavement Width: _____

Shoulder Type: _____ Shoulder Width: _____

☐ Beamguard

☐ Bicycle/Pedestrian Accommodations

Traffic During Construction: _____

Other Work: _____

V. Estimated Costs and Scheduling: *(Select each phase of the project that you are requesting Federal Funds for. Provide dollar values for all fields. Select the Fiscal Year (i.e. FY 2005 is July 1, 2004 – June 30, 2005) that you request it be scheduled. **State Review Cost MUST BE FILLED OUT** if design will be completed in this program cycle.) Priority for each phase shall be relative to your entire program submittal.*

☐ **Design:** ☐ Previously Approved ☐ FY 2005 ☐ FY 2006 ☐ FY 2007

☐ Local Staff ☐ Consultant - Cost (15 - 20% of Construction Cost) \$ _____

State Review Cost (\$5,000 to \$20,000) \$ _____

Priority _____ **TOTAL DESIGN COST** (Round to next \$1000) \$ _____

☐ **Construction:** ☐ FY 2005 ☐ FY 2006 ☐ FY 2007

Construction Cost (Include Federal Participating and Non-Participating Items) \$ _____

Const. Engineering & Contingencies (10 - 15% of Construction Cost above) \$ _____

Priority _____ **TOTAL CONSTRUCTION COST** (Round to next \$1000) \$ _____

☐ **Real Estate:** ☐ FY 2005 ☐ FY 2006 ☐ FY 2007

Priority _____ **TOTAL REAL ESTATE COST** (Round to next \$1000) \$ _____

VI. Other Issues:

Right-of-Way: *(It is recommended to be funded with local funds. Check all that are applicable.)*

- ☐ None ☐ Less than ½ Acre ☐ More than ½ Acre
☐ Parklands ☐ Large Parcels ☐ Strips ☐ Temp. Interests

Utility Work: *(It is recommended to be funded with local funds.)*

- ☐ None
☐ Yes, explain _____

Environmental Document: ☐ Programmatic ☐ ER ☐ EA ☐ EIS

- Hazardous Materials Sites ☐ Yes ☐ No ☐ Unknown
Wetland Mitigation Required ☐ Yes ☐ No ☐ Unknown
Historical Sites ☐ Yes ☐ No ☐ Unknown
Archeological Sites ☐ Yes ☐ No ☐ Unknown

Construction Restrictions *(trout, migratory bird, local events)**: _____

Other Concept Notes: _____

VII. Attach an 8 ½ x 11 map showing the project location.

Contact Person: _____ Date: _____

Title: _____ Telephone: _____